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THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM

A N N U A L R E P O R T

of the

M E D I C A L O F F I C E R O F H E A L T H

to which is appended

THE REPORT OF THE

P U B L I C H E A L T H I N S P E C T O R

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THE
URBAN DISTRICT COUNCIL
OF SHERINGHAM

PUBLIC HEALTH COMMITTEE

1 9 5 9

Chairman

Mr. Councillor H. C. Bishop.

Vice-Chairman

Mr. Councillor A.L.F. Temple.

* * * * *

Mr. Councillor H. J. Child.

Mr. Councillor A. E. Hamlin.

Mr. Councillor A. O. Harvey.

Mr. Councillor W.W.S. Hunt.

Miss Councillor G.C. Huntley.

Mr. Councillor J. H. Pegg.

Mr. Councillor J.H.V. Wilson.

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THE URBAN DISTRICT COUNCIL OF SHERINGHAM

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR ENDED 31ST. DECEMBER. 1959.

To The Chairman and Members of
The Urban District Council of Sheringham.

I have much pleasure in presenting to you the Annual Public Health Report for 1959. As my duties commenced in the latter half of the Year, it is obvious that I cannot speak from first hand experience for the earlier months. I am, therefore, particularly grateful to Mr. Sershall for the assistance and co-operation which I have received in making this report a complete record of the Year's happenings.

Topography.

The Urban District of Sheringham is situated on the North Coast of Norfolk, in a region of wide open heaths, bounded to the North of the town by the North Sea and to the South by a low range of wooded hills. It adjoins the Erpingham Rural District on three sides and has on its outskirts such picturesque places as the Roman Camp, Pretty Corner and the village of Upper Sheringham.

During the Summer months the resident population is greatly increased by an influx of visitors resorting to Sheringham for the bracing air, fine sands, golf links and scenery. It is one of the driest places in the British Isles as the air is extremely dry and bracing and consequently is highly recommended as a health resort.

The fishing industry in Sheringham still flourishes and is particularly well known for the excellence of its crabs and lobsters, although this industry is now largely superseded by the town's rapid development as a holiday centre and the increasing class who resort to Sheringham for its natural beauties and facilities.

General Statistics.

Area in acres	929.
Population (Estimated).....	4,650.
Number of inhabited houses.....	1,749.
Total Rateable Value.....	£72,496.
Product of a Penny Rate.....	£288. 17. 4.

VITAL STATISTICS.

<u>Births.</u>		<u>M</u>	<u>F</u>	<u>Total</u>
<u>Live Births</u>	Legitimate	36	31	67
	Illegitimate	-	2	2
		<u>36</u>	<u>33</u>	<u>69</u>

This gives a birth rate of 14.8 per 1,000 (corrected 18.8) of the estimated population compared with a rate of 16.5 for England and Wales. The illegitimate births comprised 2.9% of the total.

Still Births There was just one male still birth, which gives a rate of 14 per 1,000 births; the National figure is 20.7, the lowest ever recorded. There were no illegitimate still births.

Infant Mortality Deaths of infants under 1 year of age:-

	<u>M</u>	<u>F</u>	<u>Total</u>
Legitimate	1	-	1
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
	<u>2</u>	<u>-</u>	<u>2</u>

Infant Mortality Rate is 29.0

" " " (England and Wales) is 22.0

The National figure is the lowest on record.

Causes of Death. The number of deaths and their causes as recorded by the Registrar-General are shown below:-

Tuberculosis, respiratory	...	...	...	...	...	1
" other	...	...	...	...	...	-
Syphilitic disease	...	...	...	...	...	-
Diphtheria	...	...	...	...	...	-
Whooping cough	...	...	...	...	...	-
Meningococcal infections	...	...	...	...	...	-
Acute poliomyelitis	...	...	...	...	...	-
Measles	...	...	...	...	...	-
Other infective and parasitic diseases	..	...	...	...	...	-
Malignant neoplasm, stomach	...	...	...	...	...	1
Malignant neoplasm, lung, bronchus	...	...	...	...	...	3
Malignant neoplasm, breast	...	...	...	...	...	2
Malignant neoplasm, uterus	...	...	...	...	...	2
Other malignant and lymphatic neoplasms..	...	...	...	...	...	6
Leukaemia, aleukaemia	...	...	...	...	...	-
Diabetes	...	...	...	...	...	-
Vascular lesions of nervous system..	...	...	...	...	...	5
Coronary disease, angina	...	...	...	...	...	11
Hypertension with heart disease	...	...	...	...	...	3
Other heart disease	...	...	...	...	...	16
Other circulatory disease	...	...	...	...	...	2
Influenza	...	...	...	...	...	-
Pneumonia	...	...	...	...	...	4
Bronchitis	...	...	...	...	...	1
Other diseases of respiratory system	...	...	...	...	...	-
Ulcer of stomach and duodenum..	...	...	...	...	...	-
Gastritis, enteritis and diarrhoea..	...	...	...	...	...	-
Nephritis and nephrosis	...	...	...	...	...	-
Hyperplasia of prostate	...	...	...	...	...	1
Pregnancy, childbirth, abortion	...	...	...	...	...	-
Congenital malformations	...	...	...	...	...	-
Other defined and ill-defined diseases...	...	...	...	...	...	5
Motor vehicle accidents	...	...	...	...	...	1
All other accidents	...	...	...	...	...	1
Suicide	...	...	...	...	...	-
Homicide and operations of war	...	...	...	...	...	-
Total number of deaths	..	...	...	...	...	<u>65</u>

VITAL STATISTICS -(Continued)

Causes of Death -(Continued).

The total number of deaths is appreciably less than last Year (85). Heart disease accounts for approximately half of the total (49%); while Cancer was responsible for 21%. This is in accordance with the National trend; these two groups of disease are firmly established as the leading causes of death in Britain today. It is gratifying to note that once again there were no deaths from maternal causes, and apart from the one death from respiratory Tuberculosis, no deaths from infectious conditions.

The death Rate per 1,000 of the estimated population was 14.0

1958 figure 18.3

1957 figure 13.2

Corrected death rate for 1,000 " " " 9.1

National Rate 11.6

INFECTIOUS DISEASE.

The notifications received during the Year are tabulated below:

Disease	Age unknown	Under 1	1-2	3-4	5-9	10-14	15-24	25+	Total
Measles	-	2	18	25	81	3	1	1	131
T.B. Pulmonary	-	-	-	-	-	-	-	2	2
Total	-	2	18	25	81	3	1	3	133

This low incidence of infectious disease is very satisfactory, the only serious illness recorded being the two cases of Pulmonary Tuberculosis.

No cases of food poisoning were notified, which, in a town dependent upon its catering industry, speaks well for those concerned with the handling of food.

TUBERCULOSIS.

In addition to the two cases of Tuberculosis notified, there were also three inward transfers, i.e. cases of Tuberculosis who have come to live in the district, so that the total number of cases on the Tuberculosis register at the end of the Year stood at 43.

	Pulmonary		Non-Pulmonary		Total
	Males	Females	Males	Females	
New cases	-	2	-	-	2
Inward transfers	1	1	-	1	3
No. of cases on Register at 31. 12. 1959.	15	24	-	4	43

POLIOMYELITIS.

No cases of poliomyelitis occurred during the Year. With the hot dry Summer that was experienced in 1959, one would have expected a high incidence, but in the whole administrative County of Norfolk, only three paralytic cases occurred. I feel sure that the poliomyelitis vaccination programme has played a large part in producing this result, and in that case the tremendous amount of work which has been put into this scheme has been well worth while.

The number of persons vaccinated against the disease during 1959 is as follows:-

VITAL STATISTICS-(Continued)

POLIOMYELITIS -(Continued).

1959
Vaccination against Poliomyelitis

Age or Category

Two injections rec'd. in 1959	-1 1959	1 1958	2 1957	3 1956	4 1955	5 1954	6 1953	7 1952	8 1951	9 1950	10 1949	11 1948	12 1947	13 1946	14 1945	15-25 1944-33
	30	186	82	33	34	33	30	24	26	17	28	33	32	31	17	954

E.M.	G.P.	H.S.	A.S.	Total
153	1	31	1	1,776

These figures relate to Administrative Area No.2 of Norfolk County, as separate figures for Sheringham are not available.

In addition 3,218 cases who had received the second injection at least seven months previously were given a third injection in 1959.

The total number of persons vaccinated against poliomyelitis (Three injections) since the inception of the scheme is as follows:-

Children born between 1955-58. 1943-54.	Young persons born between 1933-1942.	Expectant Mothers	Gen.Practitioners & their families	Ambulance staff & their families	Hospital staff & their families	Total
824	2,947	264	146	30	114	4,341

DIPHTHERIA, WHOOPING COUGH & TETANUS.

Immunisation against diphtheria is now usually combined with that against whooping cough and tetanus, so as to reduce the total number of injections required. As a prophylatic measure, the value of inoculation against diphtheria is well proved and this disease, which only a very few years ago was so common and so feared by every mother with young children, is now a rarity.

Because one does not now meet the disease and because it has tended to be "crowded out" by the more fashionable polio programme, the number immunised has been falling off recently. This trend will have to be reversed if we do not want a return of diphtheria, and I am glad to report a small increase in the number inoculated during 1959.

IMMUNISATION AGAINST DIPHTHERIA. AREA NO.2.

Age at 31/12/59 i.e. born in Year	- 1 1959	1 1958	2 1957	3 1956	4 1955	5 1954	6 1953	7 1952	8 1951	9 1950	10 1949	11 1948	12 1947	13 1946	14 1945	Total under 15 Years
Total immunised in 1959	65	129	36	5	2	4	3	1	1	1	1	3	1	-	-	252
Ditto Booster	-	-	1	-	-	3	5	2	-	-	-	-	-	-	-	11
Total immunised at any time between 1945-1959	65	166	247	240	260	279	347	325	225	257	372	347	375	283	210	3998
Ditto Booster	-	-	1	-	1	3	10	10	8	45	131	169	284	276	220	1158

DIPHTHERIA IMMUNISATION - (Continued).

The various antigens used were as follows:-

	<u>Primary</u>	<u>Booster</u>
Triple antigen (Diphtheria/Pertussis/Tetanus)	247	10
Combined antigen (Diphtheria/Pertussis)	5	-
Single antigen (Diphtheria only)	<u>-</u>	<u>1</u>
	<u>252</u>	<u>11</u>

IMMUNISATION AGAINST TETANUS.

The following table relates to persons immunised against tetanus (excluding those protected with tripple antigen) in Area No. 2 during 1959:-

Age at date of immunisation	Under 1	1 - 4	5 - 14	Over 15	Total
Tetanus toxoid only	2	23	105	127	257

SMALLPOX VACCINATION. AREA NO.2.

The number vaccinated is almost the same as last Year:-

Age at date of vaccination	Under 1	1	2	3	4	5 - 14	15 & over	Total
Primary	192	8	2	-	2	4	24	232
Re-vaccination	-	3	1	-	4	14	85	107

Appendix - (Page 3).

B.C.G. Vaccination.

Heaf tests were carried out at Sheringham Secondary Modern School among children born in the Years 1944, 1945 and 1946. Negative reactors were vaccinated with B.C.G. Of the 247 children eligible, 163 consent forms were returned by parents, giving an acceptance rate of 66%.

No. skin tested	-	151
No. found positive	-	16
No. found negative	-	125

GENERAL PROVISIONS OF THE HEALTH SERVICE

For the purpose of carrying out the service provided by the Norfolk County Council under the National Health Service Act of 1946, the Cromer Urban District, the Sheringham Urban District and the Erpingham Rural District are combined to form County Area No. 2. These services include midwifery, the care of mothers and young children, vaccination and immunisation, home nursing, mental health, prevention of illness, care and after care, home helps and the ambulance service.

Maternity and Child Welfare. The town is served by an infant welfare clinic held twice a month at the Youth Centre, Norfolk Road. The domiciliary service is provided by a District Nurse/Midwife and a full time Health Visitor, both of whom are in attendance at the clinic, together with the Medical Officer.

All children under five are visited regularly in their homes by the Health Visitor, who takes over from the midwife when the baby is 2 weeks old. Children of five years and over come under the supervision of the school nurse.

Vaccination and Immunisation. This is carried out by the Assistant County Medical Officer and by the General Practitioners. Sessions for vaccination and immunisation against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis are arranged at clinics, schools and General Practitioners' surgeries.

School Medical Service. This takes up a considerable amount of time as every one of the 28 schools in the area is visited annually and on those occasions a full examination of all children in the appropriate age group is carried out. They are seen during their first year at school, at 10 years and before leaving; if any defects are discovered, they are referred for treatment or investigation. Children in whom there is thought to be a need for supervision are seen every year. Apart from the routine visits, many special visits to schools are made for such purposes as immunisation, mental ascertainment, examination when transport to school is believed necessary, and so on. The vision of all pupils is tested at 8 years as a routine.

General Welfare. These services are administered in the district by the Local Welfare Officer, who is in attendance and available for interview at:-

Sheringham U.D.C. Offices 2. - 2.30 p.m. Tuesday.

ENVIRONMENTAL HEALTH.

For some years there has been growing apprehension about the danger of bathing in Sea-water polluted by sewage. As this is a field in which epidemiological studies have been almost totally lacking, it has been a difficult task for Medical Officers of Health to advise their Councils as to whether a serious hazard to the health of the community existed. It is only too easy to subscribe to majority views, which, on health matters, are usually based solely on ignorance. What is needed is an authoritative statement based on facts and rational thinking, and this is now available. The Medical Research Council's Memorandum on Sewage Contamination of Bathing Beaches in England and Wales is the result of five years scientific study of this problem and its conclusion is this:- "The Committee's studies suggest that, with the possible exception of a few aesthetically revolting beaches round the coasts of England and Wales, the risk to health of bathing in sewage-contaminated Sea-water can, for all practical purposes, be ignored".

The results of the investigation are reassuring and should go a long way towards relieving anxiety about any presumed danger of contracting infectious diseases from sea-bathing. There is a point, however, which should be made quite clear. The investigation was concerned solely with the hazards to health of sea-bathing; the fact remains that bathing in sewage-polluted water is aesthetically unpleasant and, to many people, revolting. If one wishes to make a case against this coastal pollution, then the health aspect cannot be used as evidence because, as far as enlightened human knowledge goes, there is no danger. One must rely the consideration of what is aesthetically undesirable and on the loss of amenity.

In conclusion I would like to place on record the very great assistance that I have received in the compilation of this report from the staff of the Local Health Office, to whom I am most grateful.

Your obedient Servant,

P. G. HOLT.

M.B., Ch.B., D.P.H.

August, 1960.

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SANITARY CIRCUMSTANCES OF THE AREA

(The Report of the Surveyor and Public Health Inspector)

1. Water. - The Eastern Gas Board serve water to all the properties within the Urban District by a piped supply. The collecting ground, pumping station and reservoirs are situated in the Sheringham Woods, a situation which is isolated and enclosed approximately half-a-mile South of the Town.

The water is derived:-

- (a) From springs situated within the collecting grounds and stored in reservoirs.
- (b) From two deep wells sunk in chalk approximately 400 feet deep. The water is pumped into a reservoir at a higher level to supply by gravitation the high-lying parts of the Town.

- (i) (a) Quality of Water. - On behalf of the Eastern Gas Board, the Counties Public Health Laboratory carried out monthly bacteriological examinations and half-yearly chemical analysis of the treated water as supplied in this Urban District during the period under review, all of which proved to be of a very high standard of purity. Certificates giving the result of these bacteriological and chemical examinations are exhibited in the Showroom of the Eastern Gas Board's premises in Sheringham, for the perusal of the general public. Chlorine residue tests are carried out daily on the Spring and Well waters, both treated and untreated.

(b) Quantity of Water. - The quantity of water supplied in the Urban District is sufficient for all purposes during dry weather. The quantity of water obtained from the various springs naturally varies a little during the Summer and dry weather, but the level of the water in the wells varies little however much it is pumped and has never shown signs of failing.

- (ii) The water supplied within the Urban District is not liable to plumbo-solvent action, as the p.H Reaction of the water is neutral or on the alkaline side of neutrality. All the water service pipes are laid on in galvanised wrought iron.

- (iii) No action has been found necessary in respect of any form of contamination of the water supply.

- (iv) (a) Number of dwelling-houses supplied direct from public water mains 1,768.
- Number of population supplied from public water mains 4,650.
- (b) Number of dwelling-houses supplied by means of stand pipes 51.
- Number of population supplied by means of stand pipes 150.

2. Drainage and Sewerage. - The Urban District is sewered throughout with a system needing improvement as it is not capable of dealing with excessive and sudden rainfall.

The Council's Consulting Engineers have submitted schemes for:-

- (a) The provision of a 24" dia. C.I. pipe Sea outfall 367 yards long to replace the present defective and worn out outfall pipe, and
- (b) Relieving the main sewers at points of surcharge.

A Ministry of Housing and Local Government Public Inquiry on the above schemes was held in Sheringham on the 5th. February, 1958, resulting in the Minister requiring further float tests in connection with scheme (a). Scheme (b) is to be held in abeyance until after the completion of scheme (a).

SANITARY INSPECTION OF THE AREA
(Continued)

(e) Number of inspections and visits in connection with the duties of Surveyor:-

Number of Building Plans submitted for approval	..	..	..	61.
" " " " approved	..	..	..	60.
" " " " disapproved or withdrawn..	..	..	..	1.
" " " " for houses and bungalows..	..	..	..	9.
" " " " conversions	..	..	..	9.
" " " " additions and alterations	..	..	..	16.
" " " " garages	....	..	..	8.
" " " " petrol filling stations	..	..	..	1.
" " " " workshops	..	..	..	1.
" " " " showroom	..	..	..	1.
" " " " bathrooms	..	..	..	14.

Visits in connection with inspection of:-

Foundations	..	..	..	..	..	..	..	24.
Damp proof courses	..	..	..	..	..	..	..	16.
General Building Byelaw inspections	..	..	..	..	..	..	..	171.
Number of drain tests carried out in new buildings	..	..	..	..	..	..	..	30.

Number of new houses erected during the period:-

By the Local Authority	..	..	..	..	..	..	..	Nil.
By other persons	..	..	..	..	..	..	..	10.
Conversion of premises - in family units	..	..	..	..	..	..	..	11.

Number of applications for Discretionary Grants	..	..	..	3.
" " " " " approved	..	..	..	2.
" " " " Standard Grants	..	..	..	6.
" " " " " approved	..	..	..	6.
" " Inspections and visits in connection with Discretionary and Standard Grants	..	..	..	23.

- (f) Shops. No action under this heading has been found necessary.
- (g) Camping Sites. There are no camping or caravan sites in the Urban District.
- (h) Smoke Abatement. No action under this heading has been found necessary.
- (i) Swimming Baths and Pools. There are no swimming baths or pools open to the public in the Urban District.
- (j) Eradication of Bed Bugs. No evidence has been found of bed bugs in this Urban District.

Inspection and Supervision of Dood.

- (a) Milk Supply. There are no milk producers or cowkeepers within the Urban District.

Number of retail purveyors	..	..	..	..	..	..	11.
Number of Dealers Licences to use the special designation "Tuberculin Tested" and "Pasteurised" milk	..	..	..	..	..	..	7.
Number of Dealers Licences to use the special designation "Pasteurised" milk	..	..	..	..	..	..	4.
Number of Pasteuriser's Licences issued by the Norfolk County Council	..	..	..	..	..	..	1.

Forty-seven samples of Pasteurised milk have been taken during the period by the Norfolk County Council Medical Officer's Department, from the Sheringham premises and vehicles of East Coast Dairies Ltd., and all samples satisfied the prescribed tests.

Ice-Cream. Eighteen samples of Ice Cream were taken during the period from Retailers in the Urban District and submitted to the Public Health Laboratory Service, Norwich, for bacteriological examination, resulting in seventeen samples being Provisional Grade I, and one sample Provisional Grade II.

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Inspection and Supervision of Food
(Continued)

- (b) Adulteration, Chemical and Bacteriological Examination of Food. The appropriate Authority under this heading is the Norfolk County Council.
- (c) Nutrition. No special work in the dissemination of knowledge on this subject has been considered necessary.
- (d) Shellfish. No shellfish are gathered within the area of the Urban District.
- (e) Food Hygiene Regulations. Inspections of food premises in the Urban District have been made and it has been unnecessary to take any statutory or legal action in this matter.
- (f) Meat Inspection. There are eight butchers shops within the Urban District.

One Slaughterhouse is licensed in the Urban District, which is owned and used by a Sheringham butcher for the supply of meat to his retail business in the Town. This Slaughterhouse has satisfactory lairage and hanging facilities for its present use and the slaughtering and dressing of carcasses is carried out in a satisfactory manner.

Two Sheringham butchers use a Slaughterhouse situated in the adjoining Rural District for their meat supply, the remainder purchase their meat from fresh meat wholesalers.

A statement follows of the number of animals slaughtered, inspected, and condemned in whole or part, at the licensed Slaughterhouse in the Urban District:-

Carcases and Offal inspected and condemned in whole or in part.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	147	-	3	130	247	-
Number inspected	147	-	3	130	247	-
<u>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI.</u>						
Whole carcasses condemned	1	-	-	-	1	-
Carcasses of which some part or organ was condemned	39	-	-	-	10	-
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	27.21	-	-	-	4.45	-
<u>TUBERCULOSIS ONLY.</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcasses of which some part or organ was condemned	2	-	-	-	6	-
Percentage of the number inspected affected with Tuberculosis	1.36	-	-	-	2.43	-
<u>CYSTICERCOSIS.</u>						
Carcasses of which some part or organ was condemned	-	-	-	-	-	-
Carcasses submitted to treatment by refrigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

The total weight of carcase parts and organs condemned amounted to 9 $\frac{1}{4}$ cwts.

Factories Acts, 1937 and 1948. Seven inspections have been made in connection with this heading. Two informal notices were served requiring dirty premises to be cleansed, which were complied with.

* * * * *

R. H. SERSHALL,

Cert.R.S.I. & S.I.E.B., M.A.P.H.I.
Cert.R.S.I. Meat and Food Inspector.

Surveyor and Public Health
Inspector.

